

08/22/01

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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 C.F.R. § 1.53 (b))</i>		Attorney Docket No.	6627-PA1071
		First Inventor or Application Identifier	Eliezer MASLIAH
		Title	DEVELOPMENT OF TRANSGENIC MODEL FOR INTERVENTIONS IN NEURODEGENERATIVE DISEASES
		Express Mail Label No.	EL634292750US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> [Total Pages <input type="text" value="40"/>] -Descriptive title of invention -Cross References to Related Applications -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claims(s) -Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <input type="text" value="2"/>]	ACCOMPANYING APPLICATION PARTS
4. Oath or Declaration UNEXECUTED [Total Pages <input type="text" value="3"/>] a. <input checked="" type="checkbox"/> New original UNEXECUTED document b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) <i>(for continuation/divisional with Box 16 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b)	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR §3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 13. <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired <i>(PTO/SB/09-12)</i> 14. <input type="checkbox"/> Certified copy of Priority Documents(s) <i>(if foreign priority is claimed)</i> 15. <input checked="" type="checkbox"/> Other Check in the amount of \$508 00

NOTE FOR ITEMS 11 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)

16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior Application No: _____

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS					
Name	BROWN, MARTIN, HALLER & McCLAIN, LLP				
Address	1660 UNION STREET				
City	SAN DIEGO, CALIFORNIA 92101-2926				
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Name (Print/Type)	Colleen J. McKiernan	Registration No. (Attorney/Agent)	P48,570
Signature		Date	August 20, 2001



08/20/01

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PTO/SB/17 (12/99)
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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 508.00)

Complete if Known

Application Number	UNKNOWN
Filing Date	HEREWITH
First Named Inventor	Eliezer MASLIAH
Examiner Name	UNKNOWN
Group / Art Unit	UNKNOWN
Attorney Docket No.	6627-PA1071

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
Number
Deposit
Account
Name

02-4070

BROWN, MARTIN, HALLER & McCLAIN

☒ Charge Any Additional Fee Required
Under 37 C.F.R. §§ 1.16 and 1.17

2. ☒ Payment Enclosed:

☒ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	355.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$355.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
37	-20**= 17	X 9.00	= 153.00
Independent Claims	3 - 3**= 0	X	= 0
Multiple Dependent			= 0

**or number previously paid, if greater For Reissues, see below

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$153.00)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - Late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$0.00)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Colleen J. McKiernan	Registration No. (Attorney/Agent)	P48,570	Telephone	(619) 238-0999
Signature		Date	August 20, 2001		

WARNING:
Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.